



Health and Social Services

Purpose of brief:

- Inform EB-148 of activities since SC-19;
- Inform EB-148 of activities planned for 2016.

Relates to:

- ✓ Ongoing work in health and social services, privatisation, climate, QPS.

Background: The business community estimates that health services worldwide are worth more than \$12 trillion annually, and privatisation is accelerating, in almost all countries. As the health sector is composed of multiple disciplines, the overall privatisation trend can be difficult to perceive. PSI will increase its capabilities to help affiliates fight these privatisations and to organise workers in both public and privatised facilities. The occupational health and safety of healthcare workers are unevenly protected and promoted; international standards need to be more widely ratified, national standards implemented, and specific protective practices included in collective bargaining instruments at the workplace or branch level. These efforts must be made in opposition to the general contrary trend to reduce occupational health and safety as a savings measure and to privatise the regulation of occupational health and safety itself.

Discussion:

The selection process for a new PSI Health and Social Services officer has been launched in February 2016 and is expected to be concluded by May 2016.

Recruitment of new members

During 2015 PSI started three initiatives for organising workers in the health sector:

1. One focuses on the private health operators in The Philippines. An initial scoping identified the major hospital companies in Metro Manila and identified the requirements for a realistic and aggressive campaign to bring these workers into the Alliance of Filipino Workers, AFW. The organising plan was endorsed by the AFW members at their Congress, in order to ensure full support for the new approach. Resources will be allocated from PSI, SEIU and AFW.
2. The second initiative takes a regional approach in Interamerica to map private sector investment and build an organising plan in Brazil, Argentina, Chile, Colombia and Mexico. Research and training activities have started with unions, with support from UNISON and PSI.
3. The third is a pilot in East Africa, where we are currently in discussions with unions to determine needs and capabilities.

UN Commission on Health Employment and Economic Growth (CHEEG)

PSI General Secretary Rosa Pavanelli was appointed to the new UN High-Level Commission on Health Employment and Economic Growth. The Commission's objectives are to propose actions to member states in regards to the healthcare workforce that will contribute to global inclusive economic growth, the creation of decent jobs and ensure healthy lives and well-being for all, at all ages. It noted the critical role women play in healthcare provision and the need for 40 million new jobs in the health sector by 2030, especially to address the shortage of 18 million health workers in the developing world by 2030 projected by the WHO.

The Commission is co-chaired by François Hollande, French President, and Jacob Zuma, President of South Africa. The vice-chairs are from the ILO, WHO and the OECD. The first meeting was held in Lyon, France on 23 March 2016. PSI messages focus on the policy inputs needed to achieve

universal access to healthcare services, including public investment; decent working conditions for health staff; global tax reform, and an end to trade regimes that prioritise profit over public services. The Commission will present its report at the 2016 UN General Assembly.

Attacks on Occupational Health and Safety Mechanisms

In coordination with the ITUC, PSI has been engaged in discussions at the ILO, related to the implementation of a Memorandum of Understanding (MOU) signed in 2013, between the ILO and the International Standards Organization (ISO) to collaborate on an occupational health and safety management system (OHS-MS) on condition that an ISO standard should not conflict with international labour standards, and that the ILO should be an effective participant in the process. PSI has been very critical of this initiative, voicing concerns that such a standard would lead to the *de facto* outsourcing and privatisation of a standard on matters for social partners to agree on and for governments to regulate and enforce. The MOU was renewed on two occasions but this collaboration resulted in a fiasco, to the extent that the ILO had to send comments to ISO stating that “ISO/DIS 45001 does not support and respect the core ILS principle that a minimum objective of an effective occupational health and safety management system should be the organization’s compliance with national laws, regulations and other legal requirements”. The current proposed standard tramples on the ILO’s mandate and for that reason it should be set aside. The International Standards Organisation is a private independent network of the national standards bodies of 163 countries. ISO is neither an inter-governmental organisation, nor part of the UN system (though it has general consultative status with the United Nations Economic and Social Council - ECOSOC). PSI called for its affiliates in 64 countries to take action by contacting their governments, national centres and national standard bodies.

Global Campaign on the Human Right to Health

In 2016, PSI will launch a Global Campaign on the Human Right to Health, building on the outcomes of PSI’s Health Services Task Force and health sectoral meetings of PSI regional bodies. This campaign will strengthen PSI’s position at global level as the most relevant organisation for nurses and health workers and will bring together different aspects of on-going work: advocating for well-funded public health systems, the fight against privatisation and commercialisation of health, promoting decent working conditions for health staff such as nurse-patient ratios, occupational health and safety, salary and access to health. It will also reflect on how funds are used in (public) health systems – ensuring investment in human capital and putting prevention first, while outlining the responsibilities of governments in order to guarantee the human right to health for all. The Human Right to Health Campaign will also underpin the global advocacy around social protection floors. At the same time, PSI aims to deepen the mainstreaming of its priority campaigns in the health sector, such as on trade, tax justice, corruption and gender equality.

Budget implications: Within budget projections

It is recommended that EB-148:
1. **ENDORSE this report.**

YES / NO

Related documents:

- CHEEG documents and the Commission’s [communiqué](#)
- PSI submission in [English](#)
- ILO [press release](#)
- ISO documents
http://www.iso.org/iso/home/standards_development/list_of_iso_technical_committees/iso_technical_committee_participation.htm?commid=4857129
- <http://www.world-psi.org/en/regulation-private-enterprise-indulges-private-sector-and-obstructs-public-responsibility>
- <http://www.world-psi.org/en/speech-rosa-pavanelli-ilc-2015>